



W. S. CORZINE  
Governor

# New Jersey Office of the Attorney General

Division of Consumer Affairs  
State Board of Social Work Examiners  
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**FILED** Feb. 25, 2009

**NEW JERSEY BOARD OF  
SOCIAL WORK EXAMINERS**

*[Signature]*, Exec Director

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STATE OF NEW JERSEY  
DEPARTMENT OF LAW & PUBLIC SAFETY  
DIVISION OF CONSUMER AFFAIRS  
BOARD OF SOCIAL WORK EXAMINERS

IN THE MATTER OF

Lucille G. Bar-David, MSW, LCSW:

Administrative Action  
CONSENT ORDER

This matter was opened to the State Board of Social Work Examiners ("Board") upon the application of respondent, Lucille G. Bar-David, MSW, LCSW ("respondent") to reinstate a New Jersey license to practice clinical social work. In connection with that application, the Board received information from Ms. Bar-David that during a period commencing between September 1, 2008 to November 30, 2008, the respondent engaged in clinical social work in her private practice in Highland Park, New Jersey, notwithstanding that she did not possess a certification or license in violation of N.J.S.A. 45:15BB-4, N.J.A.C. 13:44G-1.3 and N.J.A.C. 13:44G-9.3.

It appearing that the respondent desires to resolve this matter without further proceedings, and the Board finding the entry of the Consent Order to be in the public interest,

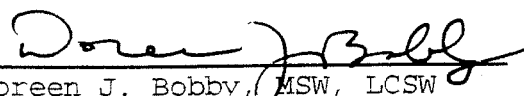
IT IS ON THIS 25<sup>th</sup> DAY OF February 2009,  
HEREBY ORDERED AND AGREED THAT

1. A license to practice clinical social work in the State of New Jersey as a Licensed Clinical Social Worker "LCSW" has been reissued to Lucille G. Bar-David, MSW upon completion of all requirements for reinstatement.

2. Respondent is hereby assessed a civil penalty in the amount of \$300.00 for practicing clinical social work without a license to do so. Said penalty shall be paid by certified check or money order made payable to the State of New Jersey and submitted to Kay K. McCormack, Executive Director, State Board of Social Work Examiners, PO Box 45033, New Jersey 07101, within fourteen days of the entry of the within Consent Order.

3. Ms. Bar-David shall identify all insurance companies for which she is a participating provider, to which she submits insurance claims, or to which insurance claims are submitted by the practice for services she provides.

NEW JERSEY STATE BOARD OF  
SOCIAL WORK EXAMINERS

  
Doreen J. Bobby, MSW, LCSW  
President

I have read the within Consent Order  
and understand its terms. I hereby  
consent to its entry and to be bound  
by the Consent Order's terms.

*Lucille G. Bar-David, MSW*  
Lucille G. Bar-David, MSW

☒ Payment Enclosed